



The WHA will work with the Holidays Cove Corporation (WHA's non-profit CHDO Organization to utilize the Family Resource Center and its new partnerships to enhance self-sufficiency services to our residents, and also the WHA will continue working with its partners to ensure that 75% of our TANF residents are working or engage in job training by March 31, 2011.

Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required

Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:

**PHA Plan Update**

- (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:
- (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.

(a) The Plan has been updated to include language and policy revisions including areas of HUD references.

(b) The PHA Plans (including attachments) and supporting documents are available for public inspection at the main administrative office of the PHA

HAP Plan Certifications of Compliance with the PHA Plans and Related Regulations  
 State/Local Government Certification of Consistency with the Consolidated Plan  
 Fair Housing Documentation  
 Consolidated Plan  
 Most recent board-approved operating budget for the public housing program  
 Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]  
 Section 8 Administrative Plan  
 Public Housing Deconcentration and Income Mixing Documentation:  
 Public housing rent determination policies  
 Schedule of flat rents offered  
 Section 8 rent determination (payment standard) policies  
 Public housing management and maintenance policy documents  
 Public housing grievance procedures  
 Section 8 informal review and hearing procedures  
 The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement  
 Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant  
 Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program  
 Approved or submitted applications for demolition and/or disposition of public housing  
 Approved or submitted assessments of reasonable revitalization of public housing  
 Any cooperative agreement between the PHA and the TANF agency  
 The most recent fiscal year audit of the PHA

6.0

**1. ELIGIBILITY, SELECTION, AND ADMISSIONS POLICIES**

PHA verifies eligibility when families are within 14 days of being offered a unit.  
 Non-income (screening) factors the PHA uses to establish eligibility for admission to public housing criminal or drug-related activity, rental history, housekeeping.  
 PHA requests (screening) criminal records from local, state, and NCIC law enforcement agencies  
 PHA weights involuntary displacement, domestic violence, and homeless, equally as priority (1) for admission.  
 PHA employs waiting list "skipping" to achieve deconcentration of poverty or to assure income mixing.  
 PHA plans to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income.

**2. FINANCIAL RESOURCES**

**Federal Grants (FY 2011 grants)**

Public Housing Operating Fund	326,848
Public Housing Capital Fund	124,569

**Prior Year Federal Grants (unobligated funds)**

FY 2011	0
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**Public Housing Dwelling Rental Income**

	307068
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**Other income**

Nondwelling	24,960
Entrepreneurial Activities	2557

**Total resources**

	<b>786,002</b>
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**3. RENT DETERMINATION**

The PHA bases rents on FMV and employs discretionary policies for determining income based rent with a minimum rent between \$26-50 Ceiling rents in place for all developments arrived at with FMV calculations.

Rent re-determinations Anytime a family member experiences an income increase/decrease, due to change in employment or additional household income

The section 8 rent reasonableness study of comparable housing is used in setting the market-based flat rents

The Voucher payment standard is 100% of FMR

The Voucher payment standards are reevaluated annually for adequacy

**4. OPERATIONS & MANAGEMENT**

HUD Programs Under PHA Management

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	99	37
Section 8 Vouchers	387	80

**5. GRIEVANCE PROCEDURES**

The PHA has not established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing

Applicants or assisted families contact the PHA main office to initiate the informal review and informal hearing processes.

**6. DESIGNATED HOUSING FOR THE ELDERLY AND DISABLED FAMILIES**

n/a

**7. COMMUNITY SERVICE AND SELF-SUFFICIENCY**

**A. Background**

The Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of Community Service (volunteer work) or participate in eight (8) hours of training, counseling, classes or other activities that help an individual toward self-sufficiency and economic independence. This is a requirement of the Public Housing Lease.

**B. Definitions**

**Community Service** – Volunteer work, which includes, but is not limited to:

- Work at a local institution including but not limited to: school, child care center, hospital, hospice, recreation center, senior center, adult day care center, homeless shelter, indigent feeding program, cooperative food bank, etc;
- Work with a non-profit organization that serves WHA residents or their children such as: Boy Scouts, Girl Scouts, Boys or Girls clubs, 4-H Program, PAL, Garden Center, Community clean-up programs, beautification programs, other youth or senior organizations;
- Work at the Weirton Housing Authority to help improve physical conditions;
- Work at the Weirton Housing Authority to help with children’s programs;
- Work at the Weirton Housing Authority to help with senior programs;
- Helping neighborhood groups with special projects;
- Working through resident organization to help other residents with problems, serving as an officer in a Resident organization, serving on the Resident Advisory Board; and
- Caring for the children of other residents so they may volunteer.

Note: Political Activity is excluded.

**Self-Sufficiency Activities** – activities that include, but are not limited to:

- Job readiness programs;
- Job training programs;
- GED Classes;
- Substance abuse or mental health counseling;
- English proficiency or literacy (reading) classes;
- Apprenticeships;
- Budgeting and credit counseling;
- Any kind of class that helps a person toward economic independence; and
- Full time student status at any school, college, or vocational school.

**EXEMPT ADULT – AN ADULT MEMBER OF THE FAMILY WHO**

- Is 62 years of age or older;
- Has a disability that prevents him/her from being gainfully employed;
- Is the caretaker of a disabled person;
- Is working at least 30 hours per week; or
- Is participating in welfare to work program.

**C. Requirements of the Program**

1. The eight (8) hours per month may be either volunteer work or self-sufficiency program activity, or a combination of the two.
2. At least eight (8) hours of activity must be performed each month, unless special circumstances warrant special consideration. The Weirton Housing Authority will make the determination of whether to allow or disallow a deviation from the schedule.
3. Activities must be performed within the community and not outside the jurisdictional area of the Authority.
4. Family Obligations:
  - a. At Lease execution or re-examination after February 1, 2000, all adult members (18 or older) of a public housing resident family must:
    - i. Provide documentation that they are exempt from Community Service requirement if they qualify for an exemption, and
    - ii. Sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in non-renewal of their lease.
  - b. At each annual re-examination, non-exempt family members must present a completed documentation form (to be provided by the Authority) of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed.
  - c. If a family member is found to be noncompliant at re-examination, he/she and the Head of Household will sign an agreement with the Authority to make up the deficient hours over the next twelve (12) month period.
5. Change in exempt status:
  - a. If during the twelve (12) month period, a non-exempt person becomes exempt, it is his/her responsibility to report this to the Authority and provide documentation of such.
  - b. If, during the twelve (12) month period, an exempt person becomes non-exempt, it is his/her responsibility to report this to the Authority. The Authority will provide the person with the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

**D. Authority Obligations:**

1. To the greatest extent possible and practicable, the Authority will:
  - a. Provide names and contacts at agencies that can provide opportunities for residents, including disabled, to fulfill their Community Service obligations. (*According to the Quality Act, a disabled person who is otherwise able to be gainfully employed is not necessarily exempt from the Community Service requirement*); and
  - b. Provide in-house opportunities for volunteer work or self-sufficiency programs.
2. The Authority will provide the family with exemption forms and Recording/Certification documentation forms and a copy of this policy at initial application and at lease execution.
3. The Authority will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Residents may use the Authority's Grievance Procedure if they disagree with the Authority's determination.
4. Noncompliance of family member:
  - a. At least thirty (30) days prior to annual re-examination the Authority will begin reviewing the exempt or non-exempt status and compliance of family members.
  - b. If the Authority finds a family member to be noncompliant, the Authority will enter into an agreement with the noncompliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period;
  - c. If, at the next annual re-examination, the family member still is not compliant, the Lease will not be renewed and the entire family will have to vacate, unless the noncompliant member agrees to move out of the unit.

**8. SAFETY AND CRIME PREVENTION**

Need for measures to ensure the safety of public housing residents Addressed by:

Volunteer Resident Patrol/Block Watchers Program

Other – After school programs educate children & adults in family complex on what to do if they observe crime in the neighborhood and who and where to report the crime. Residents are strongly urged to contact police and not take action into their own hands. Neighborhood Crime Watch has been a great tool to reduce acts of crime. WHA has only experienced two drug busts in the history of the Agency, One approximately 10 years ago and one in July 2005. Those involved were incarcerated and served terms. With NCIC background checks families that have a history of drug arrests are not eligible for occupancy with this Agency. Families who currently reside and have drug arrests are evicted as violation to Drug Policy. Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan

Police provide crime data to housing authority staff for analysis and action

Police have established a physical presence on housing authority property

**9. Pets**

In compliance with Section 526 of the Quality Housing and Work Responsibility Act of 1998, WHA residents shall be permitted to own and keep common household pets. Animals that are an auxiliary for persons with a disability are excluded from this policy. The ownership of common household pets is subject to the following rules and limitations.

**Brief Synopsis**

Common household pets shall be defined as “domesticated animals such as a dog, cat, bird, rodents, fish or turtle”. Common household pets are defined as follows:

**BIRD** Includes Canary, Parakeet, Finch and other species that are normally Kept caged; birds of prey are not permitted.

**FISH** In tanks or aquariums, not to exceed twenty (20) gallons in capacity; Poisonous or dangerous fish are not permitted.

**DOGS** Not to exceed twenty-five pounds (25lbs) weight, or fifteen (15) inches In height at full growth. Dogs must be spayed or neutered. Veterinarian’s

Recommended/suggest types of dogs are as follows: Chihuahua, pekingsese, poodle, schnauzer, cocker spaniel, dachshund, terriers.

**PITBULLS OR ROTTWEILERS WILL NOT BE PERMITTED.**

**CATS** Cats must be spayed or neutered and be de-clawed or have scratching post And should not exceed 15 pounds (15 lbs).

**RODENTS** are not considered household pets unless --- hamsters, gerbils, white rats or mice are common household pets; These animals must be kept in appropriate cages.

**REPTILES** other than turtles or small lizards such as chameleons are *Not* considered common household pets.

**EXOTIC PETS ARE NOT PERMITTED.**

Residents are permitted only 1 dog or cat in a household. Pet owners shall maintain their pet in such a manner as to prevent any damage to their unit, yard or common areas of the community in which they live. The animal shall be maintained so as not o be nuisance or a threat to the health or safety of neighbors. All pets shall be inoculated and licensed in accordance with applicable state and local laws.

**10. Civil Rights Certification**

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

**11. FISCAL YEAR AUDIT**

2011 Fiscal Year Audit was submitted in October 2011. One finding was addressed and will be resolved.

**12. ASSET MANAGEMENT**

N/A

**13. VIOLENCE AGAINST WOMEN ACT REPORT**

A goal of the Weirton Housing Authority is to fully comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offences covered by VAWA to the degree we can.

The Weirton Housing Authority provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault , or stalking.

The Weirton Housing Authority provides or offers the following activities, services, or programs that help child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

The Weirton Housing Authority provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

The Weirton Housing Authority has procedures in place to assure applicants and residents are aware of their rights under the Violence Against Women Act.

The Weirton Housing Authority has Implemented a Domestic Violence Policy effective immediately to support and assist individual or families who need emergency housing. Those individuals will be given preference on the waiting list.

The Weirton Housing Authority works with the “Light House” Domestic Violence Shelter non-profit organization to assist also with their housing needs.

7.0	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i> N/A
8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.
8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. <b>Attachment CAPITAL FUND PROGRAMS, 50075.1</b>

**8.2 Capital Fund Program Five-Year Action Plan.** As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan*, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.

**Attachment CAPITAL FUND PROGRAMS, 50075.2**

**8.3 Capital Fund Financing Program (CFFP).**  
 Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.

N/A

**Housing Needs.** Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input checked="" type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	Public -51 Voucher-193		37 80
Extremely low income <=30% AMI	Public-41 Voucher-168	80.39% 87.05%	
Very low income (>30% but <=50% AMI)	Public-8 Voucher-19	15.69% 9.84%	
Low income (>50% but <80% AMI)	Public-2 Voucher-6	3.92% 3.11%	
Families with children	Public-24 Voucher-124	47.06% 64.25%	
Elderly families	Public-4 Voucher-4	7.84% 2.07%	
Families with Disabilities	Public-12 Voucher-26	23.53% 13.47%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	22	43.14%	
2 BR	18	35.29%	
3 BR	10	19.61%	
4 BR	0	0	
5 BR			
5+ BR	1	1.96%	

**9.1 Strategy for Addressing Housing Needs.** Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

**Additional Information.** Describe the following, as well as any additional information HUD has requested.

- (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.
- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

(a)

The Housing Authority of the City of Weirton has prepared this Agency Plan in Compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements.

The mission of the Housing Authority of the City of Weirton is to assist low-income families with safe, decent, affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. The Housing Authority is committed to operating in an efficient, ethical, and professional manner. The Weirton Housing Authority will continue to create and maintain partnerships with its clients and appropriate community agencies in order to accomplish this mission.

The Housing Authority of the City of Weirton's has completed the memorandum of agreement and is currently being removed from troubled Housing Status and back to a standard performer for fiscal year 2012. We also will strive to become a High Performer.

The plans, statements, budget summary, policies, etc., set forth in the Annual Plan lead towards the accomplishment of our goals and objectives. Taken as a whole, they outline a comprehensive approach towards our goals and objectives and are consistent with the Consolidated Plan.

We also have worked to maintain a 95% or higher in Delinquency reporting on both Public Housing and Section 8 Vouchers.

WV State fire Marshal is requiring the Weirton Housing Authority to Install a sprinkler system in Overbrook Towers, which would be 130 units and 9 hallways. This is an expensive Mandated and costly project that will take place over the next three years. This will provide the tenants at Overbrook Towers with the utmost safety in fire alarm features, in which the Housing Authority warmly welcomes for the safety of its tenants.

We will continue in our effort of "Going Green" by converting the lighting in our buildings to High efficient energy saving fluorescent bulbs.

(b) Housing Authority of the City of Weirton defines the Significant amendment and Substantial deviation/modification to the PHA Plan as Follows:

- Changes to rent or admission policies or organization of the waiting list.
- Changes to Public Housing Admissions and Continued Occupancy Policy.

**Requirements for Significant Amendments to the PHA Plan**

- The PHA must consult with the Resident Advisory Board (RAB) (as defined in 24 CFR 903.13):
- The PHA must ensure consistency with the Consolidated Plan of the jurisdiction(s) (as defined in 24 CFR 903.15), and
- The PHA must provide for a review of the amendments/ modifications by the public during a 45 day public review record (as defined in 24 CFR 903.17).
- The PHA may not adopt the amendment or modification until the PHA has duly called a meeting of its Board of Directors (or similar governing body). This meeting, at which the amendment or modification is adopted, must be open to the public.
- The PHA may not implement the amendment or modification until notification of the amendment or modification is provided to HUD and approved by HUD in accordance with HUD's plan review procedures (As defined in 24 CFR 903.23)

Reviewed and Adopted  
January 21, 2010

10.0

**11.0 Required Submission for HUD Field Office Review.** In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
- (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
- (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
- (g) Challenged Elements
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the   x   5-Year and/or    Annual PHA Plan for the PHA fiscal year beginning   2012  , hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

The Housing Authority of The City of Weirton

\_\_\_\_\_  
 PHA Name WV-016  
 PHA Number/HA Code

5 -Year PHA Plan for Fiscal Years 2012 - 2016

Annual PHA Plan for Fiscal Years 20\_\_ - 20\_\_

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official  George B. Vargo	Title  Executive Director
Signature  	Date  1-6-12

**Civil Rights Certification**

**U.S. Department of Housing and Urban Development**  
Office of Public and Indian Housing  
**Expires 4/30/2011**

**Civil Rights Certification**

**Annual Certification and Board Resolution**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

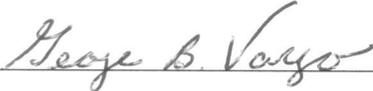
Weirton Housing Authority

WV-016

\_\_\_\_\_  
PHA Name

\_\_\_\_\_  
PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	George B. Vargo	Title	Executive Director
Signature			Date
			1-6-12

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Weirton Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing ~Voucher ~Capital Fund

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

**2. Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here  if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

George B. Vargo

Title

Executive Director

Signature

X 

Date

1-6-12

# Certification of Payments to Influence Federal Transactions

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

Applicant Name

Weirton Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing~Voucher ~Capital Fund

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

George B. Vargo

Title

Executive Director

Signature

Date (mm/dd/yyyy)



1-6-12

# DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  <b>Congressional District, if known:</b> 4c District 1	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  <b>Congressional District, if known:</b>	
<b>6. Federal Department/Agency:</b> US Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):  None	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI):	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>George B. Vargo</u> Print Name: <u>George B. Vargo</u> Title: <u>Executive Director</u> Telephone No.: <u>304-797-8530 Ext. 1</u> Date: <u>1-6-12</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)



# HOUSING AUTHORITY OF THE CITY OF WEIRTON

*George B. Vargo*, Executive Director

525 Cove Road

Weirton, West Virginia 26062

Phone 797-8530

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## ATTACHMENT

### RESIDENT ADVISORY BOARD (RAB)

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Please be advised, the RAB has supplied no comments to be attached to the 2012-2013 five (5) year annual plan.



George B. Vargo  
Executive Director

**Certification by State or Local  
Official of PHA Plans Consistency  
with the Consolidated Plan**

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011**

**Certification by State or Local Official of PHA Plans Consistency with the  
Consolidated Plan**

I, Valerie Means the Weirton City Manager certify that the Five Year and  
Annual PHA Plan of the Weirton Housing Authority is consistent with the Consolidated Plan of  
The City of Weirton prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

## CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2012

<b>Part I: Summary</b>					
<b>PHA Name: Housing Authority of the City of Weirton</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650112 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:            )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15390			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	12456			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	17500			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	54773			
11	1465.1 Dwelling Equipment—Nonexpendable	5700			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2012**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Housing Authority of the City of Weirton		<b>Grant Type and Number</b> Capital Fund Program Grant No:WV15P01650112 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2012</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:                      )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA	18750				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	124569				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b> <b>George B. Vargo</b>		<b>Date 12/30/11</b>		<b>Signature of Public Housing Director</b> <b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Weirton			<b>Grant Type and Number</b> Capital Fund Program Grant No:WV15P01650112 CFFP (Yes/ No): yes Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2012</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-Wide	WV State Board of Risk & Mgmnt Ins.	1406		8890				
HA-Wide	Fire/Police Service Fee	1406		6500				
HA-Wide	Executive Director/ Admin Assistant Salaries & Emp Benefits under Cap Fund	1410		12456				
HA-Wide	Department of Transportation for Gas Pipe line Distribution - Updated Operations and Maint Plan & Architect Fees& Marketing	1430		17500				
WV- 016		1411						
WV -016	Phase II of the Sprinkler System	1460		38569				
WV-016	Major Rehab on Overbrook Towers Vacant units	1460		16204				
WV-016	Purchase Stoves and Refrigerators	1465.1		5700				
WV-016	Repayment Anderson Alley, HUD pay back portion	1501		18750				
HA- Wide								

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name: Housing Authority of the City of Weirton</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650111 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2011</b> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:            )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0			
3	1408 Management Improvements			5000	5000
4	1410 Administration (may not exceed 10% of line 21)	5000			
5	1411 Audit	0			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25500		22058.10	22058.10
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	75319	94069	71665.20	71665.20
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority</b> <b>of the City of</b> <b>Weirton</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No:WV15P01650111 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2011</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b>					
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>		<input type="checkbox"/> <b>Revised Annual Statement (revision no:            )</b>	
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	18750	0		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	124569			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director      George B. Vargo</b> <b>Date 7/27/11</b>			<b>Signature of Public Housing Director</b>		<b>Date</b>

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Weirton			<b>Grant Type and Number</b> Capital Fund Program Grant No:WV15P01650111 CFFP (Yes/ No): yes Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2011</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-Wide	WV State Board of Risk & Mgmnt Ins.	1406		0				
HA-Wide	Fire/Police Service Fee	1406		0				
HA-Wide	Executive Director/ Admin Assistant Salaries & Emp Benefits under Cap Fund	1410		5000		5000	5000	complete
HA-Wide	Department of Transportation for Gas Pipe line Distribution - Updated Operations and Maint Plan & Architect Fee	1430		25500		22058.10	22058.10	
WV- 016	Energy Audit	1411		0				
WV -016	Replace 200 Windows at Wyles Terrace and or Phase I of Sprinkler System	1460		0				
WV-016	Phase I- Install Sprinkler system at Overbrook Towers Per WV fire codes	1460		75319		71665.20	71665.20	
WV-016	Purchase Stoves and Refrigerators	1465.1		0				
WV-016	Repayment Anderson Alley, HUD pay back portion	1501		18750	0			
HA- Wide	Remodel Apartments at Overbrook Towers (Per HUD agreement) for vacancy issues	1460			18750			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name: Housing Authority of the City of Weirton</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650110 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15390		12731	12731
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	10000	120.42	120.42	120.42
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	13000	12248.25	12248.25	12248.25
8	1440 Site Acquisition				
9	1450 Site Improvement	6337			
10	1460 Dwelling Structures	74500			
11	1465.1 Dwelling Equipment—Nonexpendable	5700	5733	5733	5733
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	7200	7167	7167	7167
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Housing Authority of the City of Weirton		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650110 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2010</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA	18750		18750	18750	
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	150877		150877	150877	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b> <b>George B. Vargo</b>		<b>Date 10/6/10</b>		<b>Signature of Public Housing Director</b> <b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Weirton		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650110 CFFP (Yes/ No): yes Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2010</b>			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-Wide	WV State Board of Risk & Mgmt Ins.	1406		8890		6281	6281	complete
HA-Wide	Fire/Police Service Fee	1406		6500		6450	6450	complete
HA-Wide	Executive Director/ Admin Assistant Salaries & Emp Benefits under Cap Fund	1410		10000		10000	10000	complete
HA-Wide	Department of Transportation for Gas Pipe line Distribution - Updated Operations and Maint Plan & Architect Fee	1430		13000	12284.25	12284.25	12.284.25	complete
WV-016	Pressure wash & Seal Gutters Buildings Family Units	1450		6337		6337	6337	complete
WV- 016	Replace 10 Boiler Room Doors. To meet fire code regulations	1460		13500		13500	13500	complete
WV-016	Replace Lobby & 2nd Floor Carpet at Overbrook Towers	1460		7000		7000	7000	complete
WV -016	Loss Prevention plan of action Fire Protection on Doors / Laundry Room Doors and Fire Walls at Overbrook Towers/Misc Repairs to Overbrook Towers to meet fire codes. Per BRIM	1460		20000		20000	20000	complete
WV-016	Repayment Anderson Alley to HUD	1501		18750		18750	18750	Paid HUD back

WV-016	Purchase Stoves and Refrigerators	1465.1		5700	5733	5733	5733	Complete
WV-016	Replace A/C Heating on roof top unit at Overbrook Towers	1475		7200	7167	7167	7167	Completed

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Weirton		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650110 CFFP (Yes/ No): yes Replacement Housing Factor Grant No:				<b>Federal FFY of Grant: 2010</b>		
WV-016	Replace 120 Bathroom exhaust fans at Overbrook Towers	1460		24000		24000	24000	completed
WV-016	Misc Concrete Work at Wyles Terrace and Overbrook Towers	1460		10000		10000	10000	completed

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name: Housing Authority of the City of Weirton</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650109 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	15390	14807.29	14807.29	14807.29
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	15138	15138	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	11000	11925.42	11525.42	11525.42
8	1440 Site Acquisition				
9	1450 Site Improvement	15358	12000	12000	12000
10	1460 Dwelling Structures	35250	38425.35	31450	31450
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	500	339.94	339.94	339.94
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Housing Authority of The City of Weirton		<b>Grant Type and Number</b> Capital Fund Program Grant No:WV15P01650109 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2009</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA	58750	58750	58750	58750	
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	151386		151386	151386	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b>		<b>Date 11/18/09</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Weirton			<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-Wide	WV State Board of Risk Management Insurance- Property/ office/Vehicle Ins.	1406		8890	8356.00	8356.00	8356	Complete
HA-Wide	Police/ Fire Service Fee	1406		6500	6451.29	6451.29	6451.29	Complete
HA-Wide	Executive Director & Administrative Assistant Salaries& Emp Benefits under Capital Fund	1410		15138	15138	0	0	-
HA-Wide	Department of Transportation for Gas Pipeline Distribution- Updated Operations & Maintenance Plan- Architect Fees	1430		11000	11925.42	11525.42	11525.42	complete
WV-016	Replacement shingles/Gutters Downspouts on 927 Edna Road Roof over Laundry/meeting Wyles Terrace	1460		5000	5000	5000	5000	Complete
WV-016	Wyles Terrace / Edna parking Lot Slurry Seal /Patch/Line painting Curb Painting /Handicap Symbols	1450		15358	12000	12000	12000	Complete
WV-016	Purchase Stove& Ref For Overbrook and Wyles Terrace	1465		0				
WV-016	3 Garage Doors and 1 Stairwell Door	1460		0	9300	9300	9300	complete

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Weirton			<b>Grant Type and Number</b> Capital Fund Program Grant No:WV15P01650109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
WV-016	Wyles Terrace- Replace Shingles/Gutters/ Downspouts Building B-8	1460		15250	7000	7000	7000	complete
WV-016	Replace Carpet 2 <sup>nd</sup> Floor and Lobby Hallway in Overbrook Towers	1460		8000	8275.35	13335.35	1335.35	complete
WV-016	Repairs of existing floor structure unit #927 Wyles Terrace & Change order Water Heater Installation (Bldg #5)	1460		7000	8850	8850	8850	complete
WV-016	Purchase Gas Blower & Lawn Mower	1475		500	339.94	339.94	339.94	complete
WV-016	3 <sup>rd</sup> Payment on FRC	1501		40000	40000	40000	40000	paid
WV-016	Anderson Alley Payment (pay back amount)	1501		18750	18750	18750	18750	Paid HUD back money

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**

<b>PHA Name:</b> Housing Authority of the City of Weirton	<b>Grant Type and Number</b> Capital Fund Program Grant No: WV15P01650108 Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> 2008
<b>Revision No. 3</b>		

Original Annual Statement    Reserve for Disasters/ Emergencies    Revised Annual Statement (revision no: 3)  
 Performance and Evaluation Report for Period Ending:    Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	17000	15,397	15397	15397
3	1408 Management Improvements	10560	0		
4	1410 Administration	12000	10,448	10448	10448
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500		10500	10500
8	1440 Site Acquisition				
9	1450 Site Improvement	25,000	40,836	40836	40836
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service	75,000		40000	40000
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	150,060	152,181	152,181	152,181
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of the City of Weirton		Grant Type and Number		Federal FY of Grant:	
Revision No. 3		Capital Fund Program Grant No: WV15P01650108		2008	
		Replacement Housing Factor Grant No:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
26	Amount of line 21 Related to Energy Conservation Measures				

PHA Name: Housing Authority of the City of Weirton		Grant Type and Number Capital Fund Program Grant No: WV15P01650108 Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Revision No. 3								
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	WV State Board of Risk & Mgmnt Ins.	1406		8,897		8897	8897	Paid
HA-Wide	Fire/Police Service Fee	1406		6,500		6500	6500	Paid
HA-Wide	Stockpile Painting Supplies/Mnts Supplies	1406		1,603	0			
HA-Wide	Computer Software Consulting	1408		10,560	0			
HA-Wide	Executive Director/Admin Assistant Salaries & Emp Benefits under CapFund	1410		12,000	10,448	10448	10448	Paid
HA-Wide	Dept of Transportation for Gas Pipeline Distribution—Updated Operatings & Maintenance Plan-Annual Requirement Cathodic Protection.A/E Fees.	1430		10,500	10500	10500	10500	Paid
WV161	Replace (5) ton A/C, Compressor and Piping, replace concrete fencing, canopy and landscaping,	1450		25,000	40,836	40836	40836	Paid
WV161	2 <sup>nd</sup> repayment on Line of Credit	1501		40,000		40000	40000	Paid
WV161	897 Edna Street, Repayment	1501		35,000		35000	35000	Paid HUD back money

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of the City of Weirton		<b>Grant Type and Number</b> Capital Fund Program No: WV016V042008 Replacement Housing Factor No:			<b>Federal FY of Grant 2008</b>		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
WV161	09/30/2010			12/31/2012			

Part I: Summary						
PHA Name/Number The Housing Authority of the City of Weirton / WV-016		Locality (City/County & State) Weirton WV 26062			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A	Development Number and Name	Work Statement for Year 1 FFY_2012_	Work Statement for Year 2 FFY- 2013	Work Statement for Year 3 FFY - 2014	Work Statement for Year 4 FFY - 2015	Work Statement for Year 5 FFY – 2016
B	Physical Improvements Subtotal	Annual Statement	67523	67523	67523	67523
C	Management Improvements		8500	8500	8500	8500
D	PHA-Wide Non-dwelling Structures and Equipment		5700	5700	5700	5700
E	<b>Administration</b>		12456	12456	15500	15500
F	Other		15000	15000	15000	15000
G	Operations		15390	15390	15390	15390
H	Demolition					
I	Development					
J	Capital Fund Financing – Debt Service		0	0	0	0
K	Total CFP Funds					
L	Total Non-CFP Funds					
M	Grand Total		\$124,569.00	\$124,569.00	\$124,569.00	\$124,569.00

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>2013</u> FFY <u>2014</u>			Work Statement for Year: <u>2014</u> FFY <u>2015</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	HA-Wide/ WV Board of Risk Management Property Ins.		8890	HA-Wide/ WV Board of Risk Management Property Ins.		8890
Annual	HA-Wide/ Police& Fire Fee		6500	HA-Wide/ Police& Fire Fee		6500
Statement	HA-Wide/ Admin Fee		12456	HA-Wide/ Admin Fee		12456
	HA-Wide/ Architect Fee & Gas Pipeline Distribution for Cathodic Protection		15000	HA-Wide/ Architect Fee & Gas pipeline Distribution for Cathodic Protection		15000
	WV-016/ Remodel Kitchens at Overbrook Towers		67523	WV-016/ Finish Remodeling Kitchens at OT		67523
	WV-016/ Replace Stoves and Refrigerators		5700	WV-016 Replace stove and refrigerators		5700
	Subtotal of Estimated Cost		\$124,569.00	Subtotal of Estimated Cost		\$124,569.00





<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY <u>2012</u>	Work Statement for Year <u>2015</u> FFY <u>2016</u>		Work Statement for Year: <u>2016</u> FFY <u>2017</u>	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	HA-Wide/ Computer Maint Fee & Travel/ Training	\$8500.00	HA-Wide/ Computer Maint Fee & Travel/ Training	\$8500.00
	Subtotal of Estimated Cost	\$8500.00	Subtotal of Estimated Cost	\$8500.00